

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. Of:	GEORGE KRSEK	)
Serial No.:	10/823,885	)
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For:	PAIN RELIEF COMPOSITION . . .	)
Group:	1617	)
Examiner:	Clayton, Deidre	)
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	KONEC 04.02	)

Commissioner of Patents & Trademarks  
Washington, D.C. 20231

**DECLARATION UNDER 37 CFR 1.132**

I, GEORGE R. KRSEK, Ph.D., hereby declare:

1. I am an Applicant in the above-referenced Application.
2. My invention comprises a bi-layer tablet consisting of a first layer (the "active layer") and a second layer, in combination with an encapsulant disposed over that bi-layer tablet, wherein the first layer comprises an orally therapeutically effective dose of oxycodone HCl in combination with dextromethorphan HBr.
3. My oral dosage form is prepared to include a first aperture extending through the encapsulant in combination with a second aperture which extends inwardly into the first layer.
4. When I first started work on my oxycodone/dextromethorphan dosage system, I used chloropheniramine malleate as a stalking horse for oxycodone to avoid handling a regulated narcotic drug.

5. In developing my oral dosage, I found it necessary to extend the aperture formed in the encapsulant into the active layer to achieve a desired drug release profile.

6. Later, I used selegiline hydrochloride as a stalking horse for oxycodone because that compound's solubility in water was similar to oxycodone.

7. When using selegiline hydrochloride I again found it necessary to extend the aperture formed in the encapsulant into the active layer to achieve a desired drug release profile.

8. When testing an oral dosage form comprising oxycodone and dextromethorphan I again found it necessary to extend the aperture formed in the encapsulant into the active layer to achieve a desired drug release profile.

9. Attached hereto as Exhibit "A" is a true and accurate copy of a page from my research notebook, wherein I signed and dated that page on October 24, 2003.

10. I compared the release profile of a first oral dosage form with a second oral dosage form, wherein both dosage forms comprised a bi-layer tablet comprising 210 milligrams of active ingredients in an active layer, an osmagen layer, and an encapsulant, wherein in the first oral dosage form an aperture extended through the encapsulant but did not extend into the active layer, and wherein in the second oral dosage form an aperture extended through the encapsulant and extended into the active layer.

11. Referring to Exhibit "B" hereto, the curve identified as the Ideal Release Profile shows a rapid initial release of Actives such that all 210 milligrams of Actives are released into the water within about 1 hour, and wherein no portion of the osmagen layer is released into the water.

12. I prepared a first oral dosage form comprising a bi-layer tablet consisting of an active layer comprising 175 milligrams oxycodone HCl and 35 milligrams dextromethorphan HBr (collectively the "Actives") and an osmagen layer, in combination with an encapsulant covering that bi-layer tablet.

13. I drilled a 1/16" inch diameter aperture through the encapsulant, wherein that aperture did not extend into the active layer.

14. I placed that first oral dosage form into 200 mL of water maintained at 36°C.

15. After about 1 hour, 2 hours, 3 hours, 4, hours, 6 hours, 8 hours, and 22 hours, I determined by ultraviolet spectroscopy the amount of Actives that had been released from the first oral dosage form.

16. Referring to Exhibit "B" hereto, the curve identified as the First Oral Dosage shows the measured release data for 1 hour, 2 hours, 4 hours, 6 hours and 22 hours for the first oral dosage.

17. Exhibits "A" and "B" show that after 6 hours all the Actives had not been released into water.

18. I prepared a second oral dosage form comprising a bi-layer tablet consisting of an active layer comprising 175 milligrams oxycodone HCl and 35 milligrams dextromethorphan HBr (collectively the "Actives") and an osmagen layer, in combination with an encapsulant covering that bi-layer tablet.

19. I drilled a 1/16" inch diameter aperture through the encapsulant covering the second oral dosage form, wherein that aperture did extend into the active layer.

20. In forming the second oral dosage form I advanced the drill bit about 2 mm into the active layer.

21. I placed that second oral dosage form into 200 mL water maintained at 36°C.

22. After about 1 hour, 2 hours, 4, hours, 6 hours, and 22 hours, I determined by ultraviolet spectroscopy the amount of Actives that had been released from the second oral dosage form.

23. Referring to Exhibit "B" hereto, the curve identified as the Second Oral Dosage shows the measured release data for 1 hour, 2 hours, 4 hours, 6 hours and 22 hours for the second oral dosage.

24. The release profile achieved using the second oral dosage form, wherein the aperture extends into the active layer, more closely matches the Ideal Release Profile than does the release profile measured using the first oral dosage form, wherein the aperture does not extend into the active layer.

25. In addition, Exhibits "A" and "B" show that 210 milligrams of Actives were released by the second oral dosage form into the water at or before the 4 hour measurement.

26. Exhibit "C" hereto graphically shows the cumulative amounts of Actives released over the first 4 hours from the first oral dosage form and the second oral dosage form.

27. After about 1 hour, the two oral dosage forms released about the same amount of Actives.

28. After about 2 hours, the second oral dosage form released about 1.7 times the amount of Actives as the first oral dosage form.

29. In light of the comparable amounts of Actives released by the two dosage forms after about 1 hour, the increased amount released by the second oral dosage form after about 2 hours was unexpected.

30. After about 4 hours, the second oral dosage form released about 2.6 times the amount of Actives as the first oral dosage form.

31. In light of the comparable amounts of Actives released by the two dosage forms after about 1 hour, the increased amount released by the second oral dosage form after about 4 hours was unexpected.

32. In light of the enhanced rate of release of Actives by the second oral dosage form, the reduced release of osmagen layer components by the second oral dosage layer after about 22 hours was unexpected.

33. The undersigned declares further that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code.

  
GEORGE R. KRSEK, Ph.D.

Date: 17 Sept 07

**CERTIFICATE OF ELECTRONIC FILING**

I hereby certify that this correspondence is herewith being electronically transmitted via Electronic Filing System to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

/Reena Mendez/

Signature

November 14, 2007

Date of Signature

# EXHIBIT “A”

23

Made 1 bilayer tablet on B-2  
with 2.10mg active + 190mg base  
coated with 8 coats of dextrane 40  
+ cellulose acetate + 1.0 PEG 400 dry  
between coats with hair dryer - blow test  
30 secs + then in oven 55°C overnight  
drill 0.05" hole but not releasing then  
redrill 0.06" (1/16) hole + get following  
release

Start 0900 - 0 in 20ml 1/2 D 36%  
9:00 - 0.0513  
10:00 - 0.053  
11:00 - 0.067 redrill  
12:00 - 0.087  
14:00 - 0.148  
16:00 - 0.162

next day 6:00 0.162  
re ground & drilled after 1 hr drying  
+ 20ml at 36°C - 10.196

Made blend of 2.4 dexamethaphen +  
0.2 gm of oxycodone + 7.8 gm of anilic  
+ blended with N-22A to give a blend  
p-2 for about 80 tabs

Made a bilayer with D-2 + N-22B base  
coated dextran/CA/PEG - 7 coats + dry overnight  
in 55°C oven + drill 1/16"

Start 0930 - 10:45 0.055  
12:05 - 0.092  
14:00 - 0.226  
16:00 0.228

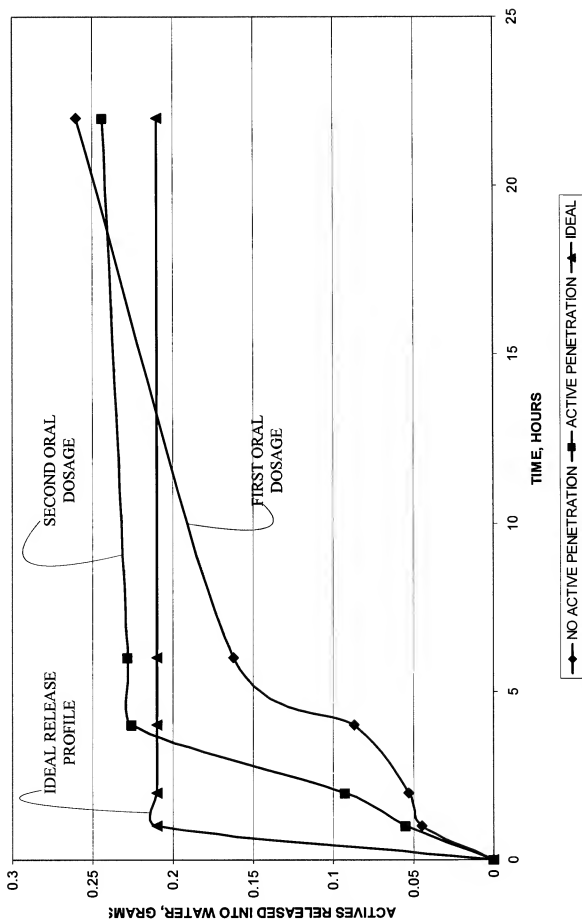
next day 10:30 0.244

Reset 2 factors



# EXHIBIT “B”

# RELEASE PROFILES



# EXHIBIT “C”

# CUMULATIVE AMOUNT OF ACTIVES RELEASED OVER TIME

